

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 701826-056380										
In re Application of Tremblay	Confirmation No. 1243											
Application Number 10/521,868	Filed 08/30/2005											
Examiner MARX, Irene	Group No. 1651											
For PROCESS FOR INCREASING THE YIELD OF LIPID AND OMEGA-3 FATTY ACID IN SEAWEED CULTURE												
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate entity fee are as follows</p> <table style="width: 100%; border: none;"> <tr> <td style="padding: 2px 0;"><input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120)</td> <td style="text-align: right; padding: 2px 0;">\$ _____</td> </tr> <tr> <td style="padding: 2px 0;"><input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$230/\$460)</td> <td style="text-align: right; padding: 2px 0;">\$ _____</td> </tr> <tr> <td style="padding: 2px 0;"><input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$525/\$1050)</td> <td style="text-align: right; padding: 2px 0;">\$ _____</td> </tr> <tr> <td style="padding: 2px 0;"><input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$820/\$1640)</td> <td style="text-align: right; padding: 2px 0;">\$ _____</td> </tr> <tr> <td style="padding: 2px 0;"><input checked="" type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1115/\$2230)</td> <td style="text-align: right; padding: 2px 0;">\$ <u>1115.00</u></td> </tr> </table> <p><input checked="" type="checkbox"/> Applicant claims small entity status.</p> <p><input type="checkbox"/> A check to cover the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>50-0850</u>.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the <input type="checkbox"/> applicant/inventor</p> <p style="padding-left: 40px;"><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p style="padding-left: 40px;"><input checked="" type="checkbox"/> attorney or agent of record.</p> <p style="padding-left: 40px;"><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;"> <p><u>/Stephen R. Duly/</u></p> <p style="text-align: center;">Signature</p> <p><u>Stephen R. Duly (Reg. No. 56,183)</u></p> <p style="text-align: center;">Typed or printed name</p> </div> <div style="width: 45%;"> <p><u>February 19, 2008</u></p> <p style="text-align: center;">Date</p> <p><u>617-345-1270</u></p> <p style="text-align: center;">Telephone Number</p> </div> </div> <p style="font-size: small; margin-top: 10px;">NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p>			<input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120)	\$ _____	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$230/\$460)	\$ _____	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$525/\$1050)	\$ _____	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$820/\$1640)	\$ _____	<input checked="" type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1115/\$2230)	\$ <u>1115.00</u>
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